STATE OF ARKANSAS Income Tax Return for an S Corporation

Calendar year 2000 or Tax Year Beginning			and Ending •					, 20				
Name of Corporation			Business Code Em			Emplo	mployer Identification Number					
•						•						
Address				Date of Incorporation			Date of Arkansas S Corp Election					
•												
City, State and Zip Code				Date Began Business in Arkansas				Date of Federal S Corp Election				
•												
	INCLUDE COPY OF FEDERAL RETURN, SCHEDULE K, K-1 A	ND ARKANSAS	TAX CRED	ITS (See Ark	ansas Bus	iness a	nd Incer	itive Pa	ickage)			
Check box if applicable: Initial Return Amended Return Final Return									of business)			
	FILING STATUS:		TYPE OF	CORPORAT	ION:							
	Corporation operating only in Arkansas	(Check only	one box belo	<i>v</i> .							
	2 Multi-state corporation - Apportionment			nestic corpora								
	Multi-state corporation - Apportionment Multi-state corporation - Direct accounting		=	eign corporati								
	ividiti-state corporation - Direct accounting	`		sign corporati	JI I							
				A. T	OTAL		В	AR	KANSAS			
6.	Gross receipts of sales: (Less returns and allowances)		6			00	6		00			
7.	Cost of goods sold and/or operations: (Submit schedule)		7			00	7		00			
8.	Gross profit: (Subtract Line 7 from Line 6)		8			00	8		00			
9.	Net gain (or loss) from Form 4797:					00	9		00			
10.	Other income: (Attach schedule)					00 1	0		00			
11.	TOTAL INCOME (LOSS): (Add Lines 8 through 10 and enter her					00	ı1 <u> </u>		00			
12.	Compensation of officers:						2		00			
13.	Salaries and wages: (See Instructions)					+	3		00			
14.	Repairs:					+	4		00			
15.	Bad Debts: (Submit schedule)					—	5		00			
16.	Rent:					+	6		00			
17.	Taxes: (See Instructions)					—	7		00			
	,					+	8		00			
18.	Deductible interest expense not claimed or reported elsewhere: .		Tool			100	°					
19a.	Depreciation: (Attach Fed. Form 4562)		00									
b.	Depreciation reported elsewhere on return: 19b		1			00 1	<u></u>		00			
C.	Subtract Line 19b from 19a: Depletion: (Do not deduct oil and gas depletion)						9c		00			
20.						+	20		00			
21.	Advertising:						21					
22.	Pension, profit-sharing, etc. plans:					—	22		00			
23.	Employee benefit programs:					 -	23		00			
24.	Other deductions: (Attach schedule)						<u>'</u>		00			
25.	TOTAL DEDUCTIONS: (Add Lines 12 through 24 and enter here	•					25		00			
26.	NET INCOME (LOSS) from trade or business activity: (Subtr. Lin					+	26		00			
27.	Excess net passive income tax: (See Instructions)					—	27		00			
28.	Income tax on capital gains: (From Schedule D, page 2)						28		00			
29.	Add Lines 27 and 28:						29		00			
30.	Payments: (2000 estimated tax payments and amount applied								00			
31.	Tax Due: (If Line 30 is less than Line 29, enter the amount due)								00			
32.	Overpayment: (If Line 30 is greater than Line 29, enter the diff.								00			
33.	Amount of refund to be credited to 2001 estimated tax : .						33		00			
34.	Refund: (Subtract Line 33 from Line 32)						34		00			
	er penalties of perjury, I declare that I have examined this return and true, correct and complete. Declaration of preparer (other than taxp								and belief, they			
Officer's Signature Date Title FOR DEPAR												
Preparer's Signature		Date	Preparer's S	SSN or PTIN	SN or PTIN Check in		_ A•					
	0			· - · · · - · · · · · ·	Emple		В		1 1			
Firm's Name (Or yours, if self-employed) and Address Pr		Preparer's Teleph	one Number		Arkansas	Reven	ie C •	 	' 			
					Agency discuss this rethe preparer shown a		ith D •	+	 			
		Employer Identific	ation Numbe	r lile prepa	Yes T	No	E •	\vdash	+			
		L			169	J 140	→= -		<u> </u>			
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	SCHEDULE A - Worksheet for Apportionment of Multistate C	Corporation						
	INCOME TO APPORTION:	·						
1.	Income: (Enter amount from page 1, Line 26, Column A)	1		00				
2.	Interest: (Do not include interest from U. S. Government obligations; Sub		—	00				
3.	Dividend income: (Submit schedule)			00				
4.	Net Income (loss) from rental activities and Royalties: (Submit schedule)			00				
5.	Net capital gain (loss) not listed on page 1: (Submit schedule)		———	00				
6.	Other income (loss): (Submit schedule)			00				
7.	Total Income: (Add Lines 1 through 6 and enter here)				00			
7. 8.	Charitable Contributions: (Submit schedule)			00	100			
9.	Section 179 expense deduction: (Submit schedule)			00				
10.	Other expenses (adjustments) not included elsewhere: (Submit schedule			00				
					00			
11.	Total deductions: (Add Lines 8 through 10 and enter here)							
12.	TOTAL APPORTIONABLE INCOME: (Subtract Line 11 from Line 7) APPORTIONMENT FACTOR:	(A)		12	- ! · · ·			
		Amounts in Arkansas	(B) Total Amor	unto	(C)			
1.	• •	Amounts in Arkansas	Total Amor	unis	Percentage (A)÷(B)			
	a. Tangible Assets used in Business and Inventories							
	Less Construction in Progress							
	Amount at the Beginning of Year	00		00	(Calculate to 6 places			
	2. Amount at the End of year	00		00	to the right of decimal. Fill in all spaces)			
	3. Total: (Add Lines a1 and a2)	00		00	999.999999 %			
	4. Average Tangible Assets: (Line a3 divided by 2)	00		00	(EXAMPLE)			
	b. Rented Property: (8 X net annual rent)	00		00	· · · · · · · · · · · · · · · · · · ·			
	c. TOTAL TANGIBLE PROPERTY: (Add Lines a4 and b)	00		00	%			
2.	•							
	Related to the Production of Income:							
	a. TOTAL:	00		00	%			
3.	Sales / Receipts:							
	a. Destination Shipped From Within Arkansas:	00						
	b. Destination Shipped From Without Arkansas:	00						
	c. Origin Shipped From Within Arkansas to U. S. Govt.:	00						
	d. Origin Shipped From Within Arkansas to							
	Other Non-taxable Jurisdictions:	00						
	e. Other Business Gross Receipts:	00						
	(Interest, dividends, rents, gains, etc. Submit Schedule)							
	f. TOTAL SALES: (Add Lines 3a through 3e)	00		00	%			
	g. Multiply Column C, Line 3f by 2 to Doubleweight the Sales Factor				. %			
4.	Sum of the Percentages: (Add Column C, Lines 1c, 2a, and 3g)				. %			
*5.	Percentage Attributable to Arkansas:Line 4	%	Divided by	=	%			
*	For Part B, Line 5, divide Line 4 by the number of entries other than zero	which you make on Part B,	Column B, Lines	(1c), (2a), a	and (3f).			
	Note: An entry other than zero in Part B, Column B, Line 3g, counts as	two (2) entries.						
C.	ARKANSAS TAXABLE INCOME:							
1.	Income Apportioned to Arkansas: (Multiple Part A, Line 12 by Part B, Lin		. 00					
2.	Add: Direct Income Allocated to Arkansas: (Submit schedule)	Add: Direct Income Allocated to Arkansas: (Submit schedule).						
3.	TOTAL INCOME TAXABLE TO ARKANSAS:				. 00			
	SCHEDULE D - Capital Gains Tax							
A.	TAX IMPOSED ON CERTAIN CAPITAL GAINS:							
1.	Taxable Income: (See Instructions; Attach computation schedule)				. 00			
2.	Enter tax on Line 1 amount: (See Instructions for computation of tax)				. 00			
3.	Net long-term capital gain reduced by net short-term capital loss:				. 00			
4.	Statutory minimum:							
5.	Subtract Line 4 from Line 3:							
6.	Tax: (Enter 6.5% of Line 5)							
7.								
	TAX IMPOSED ON CERTAIN BUILT- IN GAINS:	-,	· , ······		100			
 1.					. 00			
2.	Recognized built-in gain:							
3.	Enter smaller of Line 1 or 2:							
4.	Section 1374(b)(2) deduction:							
5.	Subtract Line 4 from Line 3: (If zero or less, enter zero here and on Line							
6.								
U.	Enter 5.5 /6 or Line 6. (Line) from and on Line 20, page 1, 1 offit AN 1100	<i>∽₁</i>						